



Patent No. 22859

Attorney Docket No. 45673.2.2

Fredrikson & Byron, P.A.  
200 South Sixth Street, Suite 4000  
Minneapolis, MN 55402-1425 USA  
Telephone: (612) 492-7000  
Facsimile: (612) 492-7077

AMENDMENT TRANSMITTAL

In re the application of:

Kieffer et al.

Application No.: 10/759,263

Examiner: Thompson, Hugh B.

Filed: January 17, 2004

Group Art Unit: 3634

For: EXTENDING LADDER AND ASSOCIATED MANUFACTURING METHODS

Mail Stop Amendment  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.

The filing fee has been calculated as shown below:

|            | Claims<br>Remaining<br>After<br>Amendment | Highest<br>No.<br>Previously<br>Paid For | Present<br>Extra<br>(Equals) | Small<br>Entity Rate | Add'l<br>Fee | OR | Large<br>Entity Rate | Add'l<br>Fee |
|------------|---|--|------------------------------|----------------------|--------------|----|----------------------|--------------|
| Total      | *   | - 20**                                   | = 0                          | x 9                  | \$           |    | x 18                 | \$           |
| Indep.     | *   | - 3***                                   | = 0                          | x 44                 | \$           |    | x 88                 | \$           |
| Mult. Dep. |   |  | =                            | + 150                | \$           |    | + 300                | \$           |
| TOTAL      |   |  |                              |                      | \$0.00       | OR | TOTAL                | \$           |

☐ First Presentation of Multiple Dependent Claim [MDC]

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- [X] The Commissioner is hereby authorized to charge payment of any fees under 37 C.F.R. § 1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 06-1910.
- [X] Supplemental Information Disclosure Statement along with a check in the amount of \$180 to cover the filing fee.

Respectfully submitted,



Allen W. Groenke  
Registration No. 42,608

*Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 06-1910.*

CERTIFICATE OF MAILING

I hereby certify that this document is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on

Oct. 18, 2004  
Date of Deposit

Stacy Bickel  
Stacy Bickel

#3025999\1